## City of Long Beach Department of Human Resources & Affirmative Action

## REASONABLE ACCOMMODATION ASSESSMENT

Please answer each question, and attach <u>all</u> pertinent information explaining your response.

Date	Job Analysis Attached En	mployee	Applican	ıτ
Name				
Dept/Bureau				
Name/ mie/F	Phone # of person completing form:			
1. What ac	ction initiated the need for a reasonable accommodation assessment?			
regu	lest by employee/applicant due to physical/mental limitations results of n	nedical exam	$\Box$	other
Tequ	lest by employee/applicant due to physical/mental limitations	nedical exam		7(1)C1
2. Can the	employee/applicant perform the essential functions without accommodation?		Yes	No
	ssential functions can the job applicant/employee not perform without an accomm le: filing, typing, loading, etc. ). Attach sheet if additional space is required.	nodation? List s	specific duti	es
	ou met with the employee/applicant to ask him/her how to effectively accommodate all space is required.	e his/her limitati	ons? Attac	h sheet
<u>Date</u>	Accommodation(s) Requested			
5. Have you	u contacted the Job Accommodation Network (JAN), (800) 232-9675, for suggestints	ions? (maintair	n names &	dates)
Commer  6. Have oth  7. Please re Use addi	ner applicants with similar limitations been accommodated in the same type of job in effect to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.	n question? Ple	ease explai	n.
Comments  6. Have other  7. Please re Use addite Essentia	ner applicants with similar limitations been accommodated in the same type of job in effer to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.	n question? Ple	ease explai	n.
Commer 6. Have oth 7. Please re Use addi Essentia Have the	ner applicants with similar limitations been accommodated in the same type of job in effect to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.	n question? Plo	ease explai	n. es belov
Comments.  Have other Use additions and Have the Essential	ner applicants with similar limitations been accommodated in the same type of job in effer to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.  al Function:  e following items been considered? (please circle). Circle "N/A" if not applicable.	n question? Plo	ease explai	n. es belov
Comments.  Have other.  Please reuse addites and the Essentiana. Works.	ner applicants with similar limitations been accommodated in the same type of job in effer to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.  al Function:  e following items been considered? (please circle). Circle "N/A" if not applicable.	n question? Ple ction separately ls it possib	ease explai  y in the box	n. es belov modate
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Commercial	ner applicants with similar limitations been accommodated in the same type of job in effer to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.  al Function:  following items been considered? (please circle). Circle "N/A" if not applicable.  I Function:  site modification to allow accessibility estructuring	n question? Ple ction separately Is it possib Yes Yes	ease explai  y in the box  le to accom  No  No	n. es belov modate N/A N/A
Commerce  Have other  Please refuse addites and the Essentianal an	the applicants with similar limitations been accommodated in the same type of job in the same type of	n question? Ple ction separately Is it possib Yes Yes Yes	ease explai  y in the box  le to accom  No  No  No	modate N/A N/A N/A
Commerce  A. Please re Use addites Essentiana. Work the Essentiana. Work	ther applicants with similar limitations been accommodated in the same type of job in the same type of	n question? Ple ction separately  Is it possib Yes Yes Yes Yes Yes Yes Yes	ease explai  y in the box  le to accom  No  No  No  No	modate N/A N/A N/A N/A N/A
Comment  T. Please re Use addi  Essentia Have the Essentia a. Work b. Job re c. Modif d. Flexib e. Reas f. Modif g. Acqui	ther applicants with similar limitations been accommodated in the same type of job in the same type of	Is it possibly Yes	ease explai  y in the box  le to accom  No  No  No  No  No  No  No  No  No	modate N/A N/A N/A N/A N/A N/A
Comment  7. Please re Use addi  Essentia Aure the Essentia a. Work b. Job re c. Modif d. Flexib e. Reas f. Modif g. Acqui h. Assig	the applicants with similar limitations been accommodated in the same type of job in the same type of	Is it possib Yes	ease explai  y in the box  No	modate N/A N/A N/A N/A N/A N/A
Comment  7. Please re Use addi  Essentia  Have the Essentia  a. Work b. Job re c. Modif d. Flexib e. Reas f. Modif g. Acqui h. Assig I. Adjus	ter applicants with similar limitations been accommodated in the same type of job in sefer to the essential functions listed in #3 above. List and review each essential functional sheets to explain your answer.  al Function:  following items been considered? (please circle). Circle "N/A" if not applicable.  I Function:  site modification to allow accessibility estructuring fied work schedule ble leave policy signment to vacant position in the same classification within department fication of existing equipment or devices isition of assistive equipment or devices inment of personal assistant, qualified reader or interpreter etement or modification of training	Is it possibly Yes	ease explai  y in the box  No	modate N/A N/A N/A N/A N/A N/A N/A N/A N/A
Comment  7. Please re Use addi  Essential Have the Essential a. Work b. Job re c. Modiff d. Flexible e. Rease f. Modiff g. Acqui h. Assig I. Adjus j. Assis	the applicants with similar limitations been accommodated in the same type of job in the same type of	Is it possibly Yes	ease explai  y in the box  No	modate N/A N/A N/A N/A N/A N/A

Essential Function:			
Have the following items been considered? (please circle). Circle "N/A" if not applied	icable.		
	Is it possible	e to accom	<u>ımodate</u>
Worksite modification to allow accessibility	Yes	No	N/A
b. Job restructuring	Yes	No	N/A
c. Modified work schedule	Yes	No	N/A
d. Flexible leave policy	Yes	No	N/A
e. Reassignment to vacant position in the same classification within department	Yes	No	N/A
f. Modification of existing equipment or devices	Yes	No	N/A
g. Acquisition of assistive equipment or devices	Yes	No	N/A
h. Assignment of personal assistant, qualified reader or interpreter	Yes	No	N/A
I. Adjustment or modification of training	Yes	No	N/A
j. Assistive equipment or devices owed by employee/applicant	Yes	No	N/A
k. Other accommodation(s) considered:			
Proposed Accommodation:			
·			
Essential Function:			
,	iaabla		
Have the following items been considered? (please circle). Circle "N/A" if not appli		- 4	
Name is a second if the state of the state o	ls it possible		
a. Worksite modification to allow accessibility	Yes	No	N/A
b. Job restructuring	Yes	No	N/A
c. Modified work schedule	Yes	No	N/A
d. Flexible leave policy	Yes	No	N/A
e. Reassignment to vacant position in the same classification within department	Yes	No	N/A
f. Modification of existing equipment or devices	Yes	No	N/A
g. Acquisition of assistive equipment or devices	Yes	No	N/A
h. Assignment of personal assistant, qualified reader or interpreter	Yes	No	N/A
Adjustment or modification of training	Yes	No	N/A
j. Assistive equipment or devices owed by employee/applicant	Yes	No	N/A
k. Other accommodation(s) considered:			
Proposed Accommodation:			
rtify that the above is a true and correct assessment of providing reasonable related restrictions. (sign & date)	accommodation for a	pplicant/e	mploye
ervisor/Manager completing assessment Department	Head or Designee		
acur with assessment:			
Human Resources/Affirmative Action			
artment's meeting with employee/applicant to discuss results of assessment (maintain	n full documentation in file	e):	
e: Brief summary of meeting:			
e: Brief summary of meeting:			